ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):			FOR COURT USE ONLY		
ELEPHONE NO.: E-MAIL ADDRESS (Option ATTORNEY FOR (Name):					
SUPERIOR COURT OF CALIFORNIA, COUNTY OF IMPERIAL 939 Main Street El Centro, CA 92243 PETITIONER: RESPONDENT:					
PETITION FOR JOINDER (Custody/Visitation)			CASE NUMBER:		
	eges as follows: t's relationship to the following minor ch	nildren is:			
Child's	s Name	Birthdat	e	Age	Gender
a.					
b.					
C.					
d.					
write A	any other minor children, attach form MC dditional Minor Children. Check here if y ld named above is currently living with:				and
☐ Petiti ☐ Resp	ioner ondent er (specify)	ir	1	(County.
a. b.	t requests that the court grant the follow Reasonable visitation with the following Visitation Application Attachment – Judi Custody of the following children as set Application Attachment – Judicial Coun- Other:	children icial Coun forth on C cil Form (1	as set forth cil Form (I Child Custo FL~311).	FL-311). ody and Vis	itation
	eted Declaration Under Uniform Child C Council Form (FL-105) is attached.				
	e under penalty of perjury, under the lavind correct, and that this declaration was				
Date:	Signatur	re:			
	Print Na	me'			